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PTO/SB/21-08-00

Approved for use through 10/31/2002. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/040,547	
	<b>Filing Date</b>	01/04/2002	
	<b>First Named Inventor</b>	BLOOD, Christine	
	<b>Group Art Unit</b>	1653	
	<b>Examiner Name</b>	C. Kam	
<b>Total Number of Pages in This Submission</b>	1	<b>Attorney Docket Number</b>	70025-04-CIP

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center;"><b>RECEIVED</b> NOV 29 2002 TECH CENTER 1600/2900</div>
<b>Remarks</b> Supplemental Information Disclosure 37 CFR 1.97(b)(3)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Stephen A. Slusher PEACOCK, MYERS & ADAMS, P.C.
Signature	
Date	November 21, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 11/21/2002			
Typed or printed name	Stephen A. Slusher		
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Substitute for form 1449B/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

*(use as many sheets as necessary)*

Sheet	1	of	1
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**Complete if Known**

<b>Application Number</b>	<b>10/040,547</b>
<b>Filing Date</b>	<b>January 4, 2002</b>
<b>First Named Inventor</b>	<b>BLOOD, Christine</b>
<b>Group Art Unit</b>	<b>1653</b>
<b>Examiner Name</b>	<b>C. Kam</b>
<b>Attorney Docket Number</b>	<b>70025-04-CIP</b>

**OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS**

[illegible]

Examiner  
Signature

Date  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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